



AXLE SPECIFICATION CHANGE REQUEST

Appendix A

* DEALER NAME:

* DEALER CONTACT NAME: PH:

* CUSTOMER NAME:

* KENWORTH MODEL:

* CHASSIS NO: * ODOMETER (Should be delivery km's only):

• **DRIVEHEAD DETAILS:**

* CARRIER MODEL:

* RATIO:

* FRONT D/HEAD PART NO:

* REAR D/HEAD PART NO:

* MODEL OF FWD INPUT YOKE:

* REAR INPUT YOKE:

* DIFF LOCK (Tick Yes or No): FRONT: YES NO REAR: YES NO

• **DRIVEHEAD REQUIRED:**

* CARRIER MODEL:

* RATIO:

* FRONT D/HEAD PART NO:

* REAR D/HEAD PART NO:

* MODEL OF FWD INPUT YOKE:

* REAR INPUT YOKE:

* DIFF LOCK (Tick Yes or No): FRONT: YES NO REAR: YES NO

Note: Original drive heads must be returned to Dana within 10 days of receiving replacement drive heads.

DANA USE ONLY:

RRA No. ISSUED: _____ DATE ISSUED: _____

S/O NUMBER: _____ INVOICE NUMBER: _____ RECORDED WAR: _____

GR DOCKET: _____ GR DATE: _____ PASSED FOR CREDIT: _____

PARTS SENT:

FRONT D/HEAD PART NO: _____ SER. No : _____

REAR D/HEAD PART NO: _____ SER. No : _____

HARDWARE: _____

PARTS TO RETURN:

FRONT D/HEAD PART NO: _____ REAR D/HEAD PART NO: _____

HARDWARE: _____